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## BIB DATA SHEET

CONFIRMATION NO. 3933

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/565,046	01/17/2006 RULE	514	1625	PU60398
<b>APPLICANTS</b> Kristen E. Belmonte, King of Prussia, PA; Jakob Busch-Petersen, King of Prussia, PA; Dramane I. Laine, King of Prussia, PA; Michael R. Palovich, King of Prussia, PA;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/US04/22947 07/16/2004 which claims benefit of 60/487,981 07/17/2003				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 05/02/2006				
Foreign Priority claimed <input type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <input type="checkbox"/> Examiner's signature _____ <input type="checkbox"/> Met after Allowance <input type="checkbox"/> Initials _____	<b>STATE OR COUNTRY</b> PA	<b>SHEETS DRAWINGS</b> 0	<b>TOTAL CLAIMS</b> 13	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> GLAXOSMITHKLINE CORPORATE INTELLECTUAL PROPERTY, MAI B475 FIVE MOORE DR., PO BOX 13398 RESEARCH TRIANGLE PARK, NC 27709-3398 UNITED STATES				
<b>TITLE</b> Muscarinic acetylcholine receptor antagonists				
<b>FILING FEE RECEIVED</b> 600	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	